State of washington Department of Ecology

APPLICATION FOR PERMIT TO APPR RIATE PUBLIC WATERS OF THE S JE OF WASHINGTON

☐ SURFACE WATER

GROUND	WATER)
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\$10.00 MINIMUM STATUTORY EXAMINATION FEE REQUIRED WITH APPLICATION

A10:46 **JUN 27** .00 (GRAY BOXES FOR OFFICE USE ONLY) APPLICATION NO COUNTY PRIORITY DATE W.A.I.A LIA 6/27/02 2 APPLICANT'S NAME - PLEASE PRINT R. BOWMAN FE Home Tel. 360-426-0978 Other Tel. ADDRESS (STREET) (STATE) (ZIP CODE) 18584 DATE & PLACE OF INCORPORATION IF APPLICANT IS A CORPORATION Shetton wash SOURCE OF SUPPLY IF SURFACE WATER IF GROUND WATER SOURCE (NAME OF STREAM, LAKE, SPRING, ETC.) (IF UNNAMED, SO STATE) SOURCE (WELL TUNNEL, INFILTRATION TRENCH, ETC We TRIBUTARY SIZE AND DEPTH 6 USE TO BE APPLIED (DOMESTIC SUPPLY, igation ACRE FEET PER YEAR CUBIC FEET PER SECOND (CFS) GALLONS PER MINUTE (GPM) ENTER CLIANTITY OF WATER OR TIMES DURING YEAR WATER WILL BE REQUIRED IF DOMESTIC USE, NUMBER OF UNITS BY TYPE, E.G. 1-HOME, 1-MOBILE HOME, 2-CAMPSITES, ETC. 1-Home IF MUNICIPAL USE, ESTIMATED POPULATION 20 YEARS FROM TODAY IF IRRIGATION, NUMBER OF ACRES Acre + DATE PROJECT WAS OR WILL BE STARTED DATE PROJECT WAS OR WILL BE COMPLETED LOCATION OF POINT OF DIVERSION/WITHDRAWAL 3. 3A. IF IN PLATTED PROPERTY OF (GIVE NAME OF PLAT OR ADDITION) SECTION TOWN ALSO, PLEASE ENCLOSE A COPY OF THE PLAT AND MARK THE POINT(S) OF WITHDRAWAL OR DIVERSION 3B. IF NOT IN PLATTED PROPERTY ON ACCOMPANYING SECTION MAPS, ACCURATELY MARK AND IDENTIFY EACH POINT OF DIVERSION. SHOW NORTH-SOUTH AND EAST-WEST DISTANCES FROM NEAREST SECTION CORNER OR PROPERTY CORNER. ALSO, ENTER BELOW THE DISTANCES FROM THE NEAREST SECTION OR PROPERTY CORNER TO THE DIVERSION OR WITHDRAWAL. ATED WITHIN (SMALLEST LEGAL SUBDIVISION) SECTION TOWNSHIP N RANGE (E. OR W.) W.M COUNTY 5 MASON DO YOU OWN THE LAND ON WHICH THIS SOURCE IS LOCATED. IF NOT, INSERT NAME & ADDRESS OF OWNER LEGAL DESCRIPTION OF PROPERTY ON WHICH WATER IS TO BE USED ATTACH A COPY OF THE LEGAL DESCRIPTION OF THE PROPERTY (ON WHICH THE WATER WILL BE USED) TAKEN FROM A REAL ESTATE CONTRACT, PROPERTY DEED OR TITLE INSURANCE POLICY. OR, COPY CAREFULLY IN THE SPACE BELOW Knon in d APPLICATION

WHAT IS YOUR INTEREST IN THE PROPERTY ON WHICH WE WATER IS TO BE USED (PROPERTY OWNER, LESSEE, CONTY) T PURCHASEIN TO BE USED (PROPERTY OWNER, LESSEE, CONTY) T PURCHASEIN TO BE USED (PROPERTY OWNER, LESSEE, CONTY) T PURCHASEIN TO BE USED (PROPERTY OWNER, LESSEE, CONTY) T PURCHASEIN TO BE USED (PROPERTY OWNER, LESSEE, CONTY) TO PURCHASEIN T	R, ETC.)	
ARE THERE ANY EXISTING WATER RIGHTS RELATED TO THE LAND ON WHICH THE WATER IS TO BE USED (INCLUDING WATER PROVIDE IRRIGATION DISTRICTS OR DITCH COMPANIES.)	D BY D YES	D NO
F YES, FROM WHAT SOURCE (i.e. SURFACE OR GROUND WATER) AND UNDER WHAT AUTHORITY	\ .	
COMPLETE THIS FORM ONLY IF THIS APPLICATION INCLUDES IRRIGATION AS A USE		
IN ORDER TO IMPLEMENT THE PROVISIONS OF INITIATIVE MEASURE NUMBER 59, THE FAMILY FARM WATER ACT WHICH WAS PASSED BY THE VOTERS FOLLOWING QUESTIONS:	S ON NOVEMBER 3, 1977, WE	MUST ASK THE
DOES THE TOTAL NUMBER OF ACRES IN WHICH YOU HAVE CONTROLLING INTEREST IN THE STATE OF WASHINGTON EXCEED 2000 ACRES FOR	THE FOLLOWING THREE C	ATEGORIES:
1. LANDS THAT ARE BEING IRRIGATED UNDER WATER RIGHTS ACQUIRED AFTER DECEMBER 8, 1977.	YES 📙	№ Д
2. LANDS THAT MAY BE IRRIGATED UNDER APPLICATIONS NOW ON FILE WITH THE DEPARTMENT OF ECOLOGY. 3. LANDS THAT MAY BE IRRIGATED UNDER THIS APPLICATION.	YES YES	NO NO
PLEASE SIGN AND RETURN		
(Signature of Landowner)		
(Date)		
DESCRIPTION OF SYSTEM PROPOSED OR INSTALLED		
FOR EXAMPLE: SIZE OF PUMP, CAPACITY OF PUMP, PUMP MOTOR HORSE POWER, PIPE DIAMETER, NUMBER OF SPRINKLERS, ETC.)		
er I Carry		
85 Deep - 6 CASING		
EMARKS		

IF 10 ACRE-FEET OR MORE OF WATER IS TO BE STORED AND/OR IF THE WATER DEPTH WILL BE 10 FEET OP POINT, A STORAGE PERMIT MUST BE FILED IN ADDITION TO THIS PERMIT. THESE FORMS CAN BE SECURED, T	OR MORE AT THE DEEP	EST
TIONS, FROM THE DEPARTMENT OF ECOLOGY.		
SIGNATURES		
APPLICANT'S S	SIGNATURE	
LEER, BOWMAN JUST LEGAL LANDOWNER'S SIGNATURE LEGAL LANDOWNER'S LEGAL LA	~~	
LEGAL LANDOWNER'S NAME (PLEASE PRINT) DESCRIBED IN ITE		14.2.
LEGAL LANDOWN	n Rd Tre	11000
		9838
FOR OFFICE USE ONLY		
STATE OF WASHINGTON SS.		
DEPARTMENT OF ECOLOGY		
This is to certify that I have examined this application together with	h the accompanyin	ig maps
and data, and am returning it for correction or completion as follows:		

In order to retain its priority date, this application must be return		
Ecology, with corrections, on or before		
Witness my hand thisday of		
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Department of Ecology

ECY 040-1-14 Rev. 1/85